



Government of the District of Columbia
Office of the Chief Financial Officer
Office of Tax and Revenue

2005
D-30ES

D-30ES

Declaration of Estimated Franchise Tax for Unincorporated Businesses

Secure - Accurate - Convenient ...

File Electronically Today!
www.cfo.dc.gov/otr



Any voucher that exceeds \$25,000 must be filed electronically.

D-30ES (REV. 10/04)

Who must file?

An unincorporated business must file a declaration of estimated franchise tax if its DC franchise tax liability is expected to exceed \$1,000 for the taxable year.

When are the declaration vouchers due?

Calendar year taxpayers, file your declaration vouchers by the following dates:

- Voucher 1 — April 15
- Voucher 2 — June 15
- Voucher 3 — September 15
- Voucher 4 — December 15

Fiscal year taxpayers, file your declaration vouchers by the following dates:

- Voucher 1 — the fifteenth day of the fourth month of the business taxable year
- Voucher 2 — the fifteenth day of the sixth month of the business taxable year
- Voucher 3 — the fifteenth day of the ninth month of the business taxable year
- Voucher 4 — the fifteenth day of the twelfth month of the business taxable year

If a due date falls on a Saturday, Sunday, or a legal holiday, the voucher is due the next business day.

How do you make payments?

You may pay your estimated tax and file your voucher electronically free of charge through the DC Government web site. To register for this, go to www.cfo.dc.gov/etsc, select Taxpayer Service Center, select Business Tax Service

Center, and then select Registration for New Users. Complete the application and return it to us. After you receive your password, you can file and pay online.

If you choose to file by paper, mail the voucher and payment to:
Office of Tax and Revenue
Unincorporated Estimated Franchise Tax
PO Box 96020, Washington DC 20090-6020

NOTE: Please use the address labels provided when mailing your vouchers.

Make the check or money order payable to the *DC Treasurer*. Please write “D-30ES”, the voucher number, your Federal Employer Identification Number (FEIN) or SSN and the tax year on your payment.

What if your estimated tax changes?

If initially the business is not required to file a declaration but later in the taxable year the estimated franchise tax liability increases to an amount greater than \$1,000, begin filing with the first available voucher due. See “**When are the declaration vouchers due?**” on page 3 for the due dates. If estimated tax liability changes substantially, adjust the next payments accordingly.

Could you be charged a penalty or fee?

If you underestimate your taxes:

You will be charged an underpayment rate of 10% per year compounded daily if your withholdings, credits and estimated tax payments do not equal:

- At least 90% of the amount of tax you will owe on your 2005 DC return, or

- 100% of the amount of tax the business owed on the 2004 DC return.

If you falsely state your estimated taxes:

You will be charged a penalty if any statement made on the voucher is not true and accurate to the best of your knowledge.

What is the charge for each dishonored check?

We charge \$65 for each dishonored check sent to us.

Where do you call if you have questions?

Call the Office of Tax and Revenue at 202-727-4829.

Do not print outside the boxes.

Using black ink, print in capital letters.

ROBERTS

Leave a space between words and between numbers and words.

8 ELM

Yes

No

Write 3s with rounded tops, not flat tops.

3 7 ~~3 7~~

Write 7s without middle bars.

Round cents to the nearest dollar.

\$ 57204.00

Do not enter cents.

Record of payments

Use this worksheet to record your payments and plan how much of any overpayment credit you will apply to each installment.

KEEP FOR YOUR RECORDS
Estimated Tax Payments

Total estimated tax for 2005

Credits from any 2004 D-30 overpayment

| <i>Voucher number</i> | <i>Installment amount</i> | <i>—</i> | <i>Portion of 2004 overpayment applied</i> | <i>=</i> | <i>Payment amount</i> | <i>Date paid</i> | <i>Payment Information</i> |
|-----------------------|---------------------------|----------|--|----------|-----------------------|------------------|----------------------------|
| 1 | | — | | = | | | |
| 2 | | — | | = | | | |
| 3 | | — | | = | | | |
| 4 | | — | | = | | | |

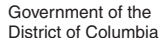
CHANGE OF ADDRESS/PERSON TO CONTACT

Please Fill-in One:
☐ Unincorporated Business
☐ Corporation

If you have moved or changed the contact person, please complete this form and mail it to the Office of Tax and Revenue, PO Box 470, Washington, DC 20044-0470.

| | | |
|---|--|---------------|
| FEIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | SSN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | BUSINESS NAME |
| PREVIOUS MAILING ADDRESS | NEW MAILING ADDRESS | |
| PREVIOUS BUSINESS ADDRESS | NEW BUSINESS ADDRESS | |
| PERSON TO CONTACT AND PHONE NUMBER | DATE MOVED | |

For all other changes, call Customer Service Administration (202) 727-4829.



2005

2005 D-30ES Unincorporated Business Declaration of Estimated Franchise Tax



0 5 0 3 0 0 2 1 0 0 0 0

Quarterly payment
(dollars only)

00

Federal Employer I.D. Number

SSN (If self employed)

Tax Year Ending (MMDDYYYY)

Business Name

Mailing Address Line 1

Fill in ☐ if this is your first return or if your address changed from your last return

Mailing Address Line 2

City

State

Zip Code

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Voucher number:

Due date:



OFFICE OF TAX AND REVENUE
UNINCORPORATED BUSINESS
ESTIMATED FRANCHISE TAX
PO BOX 96020
WASHINGTON DC 20090-6020



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